

PART B - FEE(S) TRANSMITTAL

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28875 7590

09/24/2004

Zilka-Kotab, PC
P.O. BOX 721120
SAN JOSE, CA 95172-1120

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Erica L. Farlow (Depositor's name)
[Signature] (Signature)
September 30, 2004 (Date)

10/06/2004 AKELECH2 00000134 501351 09708927
01 FC:1501 40.00 DA 1330.00 BP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/708,927	11/08/2000	Paul F. Hanchett	NETA AP003	2980

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONFIGURATION, MANAGEMENT, AND MONITORING OF A COMPUTER NETWORK USING INHERITANCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	10/06/2004 AKELECH2 00000134 09708927 04	
EXAMINER	ART UNIT	CLASS-SUBCLASS			
NGUYEN, HAI V	2142	709-223000	01 FC:1501	1330.00 DP	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Zilka-Kotab, PC
2. Christopher J. Hamaty
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Networks Associates Technology, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☒ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NA11P280

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Authorized Signature

Kevin J. Zilka

Typed or printed name

Date

9/30/04

Registration No.

41,429

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